



# 2006-2007 Transfer Entitlement Cal Grant Certification Form

The California Student Aid Commission (CSAC) is sending you this form to verify your eligibility to receive a Transfer Entitlement Cal Grant Award. Read this form carefully then complete, sign, date and mail to the address listed on the back of this form within 30 days of receiving this letter. This form **must** be returned to CSAC before you will be further considered for a Transfer Entitlement Cal Grant Award. Failure to return this form within 30 days will adversely impact your ability to be considered for a Cal Grant Competitive award. Faxed copies of this form will not be accepted. Please see other side for instructions.

## Transfer Entitlement Program Requirements

Every Transfer Entitlement Cal Grant recipient **must meet all of the following:**

- graduate from a California high school (unless due to military orders that required the student or the student's parent or guardian to be out of state at the time of graduation) or have completed a high school graduation equivalency (including GED or the California High School Proficiency Exam) on or after July 1, 2000;
- be a California resident at the time of their high school graduation or its equivalent,
- submit a California Community College GPA of at least a 2.40;
- during the 2006-2007 academic year, transfer from a California Community College to a qualifying California institution that offers a bachelor's degree.

### Student Certification:

I, \_\_\_\_\_  
First Name MI Last Name Social Security number or CSAC ID (circle one)

**certify under penalty of perjury that:**

(please check the appropriate box that applies)

I graduated from high school or its equivalent, on or after July 1, 2000. ☐ YES ☐ NO

Print the month and year of your high school graduation or equivalent: \_\_\_\_\_

I graduated from a California high school. ☐ YES ☐ NO

I graduated from a high school outside of California due to military orders that required me (or my parent or guardian) to be outside California at time of my high school graduation. ☐ YES ☐ NO

Print the name of the high school from which you graduated: \_\_\_\_\_

Print the city and state of the high school: \_\_\_\_\_

I was a California resident at the time of my high school graduation or equivalent. ☐ YES ☐ NO

Print the date you became a California resident: \_\_\_\_\_

For the 2006-2007 academic year, I am transferring from a California Community College to a qualifying California institution that offers a bachelor's degree. ☐ YES ☐ NO

Print the name of the California Community College: \_\_\_\_\_

Print the name of the school where you are transferring: \_\_\_\_\_

**Student certification:** I have read the information printed above. I certify that the information I listed above is true and correct to the best of my knowledge. I understand that it is illegal to report false or misleading information. I certify under penalty of perjury under the laws of the State of California, that the foregoing is true and correct.

Signature \_\_\_\_\_

Date \_\_\_\_\_

In order to receive further consideration for a Cal Grant award, you must complete, sign and return this form to CSAC within 30 days of the date of your letter. Even if you are not eligible for a Cal Grant Transfer Entitlement Award, you will automatically be considered for a Competitive Cal Grant Award, but only if you complete and return this form within 30 days. Faxed copies of the completed form will not be accepted.

***Instructions for filling out the Student Certification section:***

When completing this form, please print clearly using black ink only.

Answer each question, checking the appropriate box, as it applies to your situation.

- ♦ Print ***your name*** as it appears on your Social Security card. Enter your first name, middle initial and last name.
- ♦ Print ***your Social Security number*** as it appears on your Social Security card or CSAC ID as it appears on your CSAC notification letter.
- ♦ Print the ***month and year you graduated from high school***. For example, June 2006.
- ♦ Print the ***name of your high school and the city where it is located***. For example, ABC High School, Los Angeles, CA.
- ♦ Print the ***date you became a resident of the State of California***. For example, If you were born in and remained in California, you would list your date of birth.
- ♦ Print the ***name of the California Community College*** from which you are transferring. For example, College of the Redwoods.
- ♦ Print the ***name of the school to which you are transferring***. For example, CSU Humboldt.

***Signature:*** By signing this form, you certify that you have read the instructions and the information you provided is correct. It is illegal to report false or misleading information on this form and in doing so, may result in any Cal Grant award being revoked and that CSAC may seek repayment of any grant amount that is obtained based on the submission of inaccurate information.

For more information on filling out this form or for questions on Cal Grant eligibility, contact CSAC at (888) 224-7268 or by email at [studentsupport@csac.ca.gov](mailto:studentsupport@csac.ca.gov).

Faxed copies of this completed form will not be accepted.

**Mail completed forms to:**

California Student Aid Commission  
Cal Grant Operations Branch  
PO Box 419028  
Rancho Cordova, CA 95741-9028

